PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/562650

| (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN OR SMALL ENTITY | |
|-----------------------------|--|---|------------------------|------------------------------------|--------------|---|---------------------|---------------------------------------|------------|----------------------------|--|
| U.S. NATIONAL STAGE FEES | | | (55,2 | 11 13 | | (Column 2) | RATE | FEE | 7 | | |
| BASIC FEE | | | SMALL ENT | . = \$ 150 | LAR | GE ENT. = \$ 300 | BASIC FEE | 1 | ┤ ू | RATE | FEE |
| EXAMINATION FEE | | | Satisfies PCT A | | | ther situations = | | | OR | | 386 |
| SEADOH FEF | | | | ons (ie. No | | \$ 100 / \$ 200 ISA = \$ 50 / \$ 100 | EXAM. FEE | | 4 | EXAM. FEE | 200 |
| SEARCH FEE | | | Search F = \$ 250 / | | | other countries = \$ 200 / \$ 400 | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | min | us 100 = | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | H/ mir | nus 20 = | <i>* خ</i> | 7/ | X \$ 25 = | | OR | X \$ 50 = | 1050 |
| INDEPENDENT CLAIMS | | | 6 m | inus 3 = | * , | 3 | X \$ 100 = | | OR | X \$ 200 = | 600 |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | | | + \$ 180 = | · · · · · · · · · · · · · · · · · · · | OR | + \$ 360 = | 120 |
| * If | the difference | in column 1 is | less than zero | , enter "0 | " in cc | olumn 2 | TOTAL | | OR | TOTAL | <i>350</i> 0 |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | |
| | | (Column 1) | (Column 2) (Column 3) | | | | SMALL E | NTITY | OR | OTHER SMALL E | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUME PREVIO PAID I | BER JUSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | |
| | | (Column 1) | | (Colum | ın 2) | (Column 3) | • | | ı | rer (| |
| END | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOI PAID F | ER USLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | | OR L | TOTAL ADDIT. FFF | |
| ** | If the "Highest Nu | mn 1 is less than the mber Previously Paic mber Previously Paic | d For" IN THIS SPA | ACF is less | than 120 | " enter "20" | FFF L | | | | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.